

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000059404 | Submit Date: 2018-09-04 | FRN: 0026907345

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

09/04/2018 Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0026907345	HC2 Station Group, Inc.

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
450 Park Avenue 30th Floor	New York	NY	10022	+1 (212) 339-5165	rhanson@hc2broadcasting.

2. Contact Representative

Name	Organization
Rebecca Hanson	HC2 Broadcasting Holdings Inc.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
450 Park Avenue 30th Floor	New York	NY	10022	+1 (212) 339- 5165	rhanson@hc2broadcasting.

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent: Relationship to stations/permits Licensee Nature of Respondent For-profit corporation

(b) Provide the following information about this report:		
Purpose	Transfer of control or assignment of license/permit	
"As of" date	08/03/2018	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	

/Permittees(s) and Station(s) /Permit(s)

Respondent is filing this report to cover the following Licensee(s)/Permittee(s) and station(s)/permit(s):

Licensee/Permittee Name	FRN
HC2 Station Group, Inc.	0026907345

Fac. ID No.	Call Sign	City	State	Service
17433	KAZD	LAKE DALLAS	TX	DTV
31870	KYAZ	KATY	тх	DTV
34440	KEMO-TV	SANTA ROSA	CA	DTV

Section II – Non-Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Statement of Sole Incorporator of HC2 Station Group, Inc. and Bylaws of HC2 Station Group, Inc. (a Delaware corporation)	
Parties to contract or instrument	HC2 Station Group, Inc.	
Date of execution	10/2017	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Statement of Sole Incorporator of HC2 Station Group, Inc. and Bylaws of HC2 Station Group, Inc. (a Delaware corporation)	

Document Information		
Description of contract or instrument	HC2 Station Group, Inc. Unanimous Written Consent of the Board of Directors	
Parties to contract or instrument	HC2 Station Group, Inc.	
Date of execution	01/2018	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: HC2 Station Group, Inc. Unanimous Written Consent of the Board of Directors	

Document Information		
Description of contract or instrument	Certificate of Incorporation of HC2 Station Group, Inc.	
Parties to contract or instrument	HC2 Station Group, Inc.	
Date of execution	10/2017	
Date of expiration	No expiration date	

Agreement type (check all that apply)	Other Agreement Type: Certificate of Incorporation of HC2
	Station Group, Inc.

Document Information		
Description of contract or instrument	Contribution Agreement	
Parties to contract or instrument	HC2 Broadcasting Holdings Inc.; HC2 Broadcasting Intermediate Holdings Inc.	
Date of execution	05/2018	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Contribution Agreement	

Document Information			
Description of contract or instrument	HC2 Station Group, Inc. Consent of Sole Stockholder in Lieu of Organizational Meeting		
Parties to contract or instrument	HC2 Station Group, Inc.		
Date of execution	10/2017		
Date of expiration	No expiration date		
Agreement type (check all that apply)	Other Agreement Type: HC2 Station Group, Inc. Consent of Sole Stockholder in Lieu of Organizational Meeting		

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information	Ownership Information		
FRN	0026907345		
Entity Name	HC2 Station Group, Inc.		
Address	РО Вох	PO Box	
	Street 1	450 Park Avenue	
	Street 2	30th Floor	

	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code 10022		
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one or report?	or more broadcast stations	Yes

Ownership Information				
FRN	0027535111	0027535111		
Entity Name	HC2 Broadcasting Intermedia	te Holdings Inc.		
Address	РО Вох	PO Box Street 1 450 Park Avenue		
	Street 1			
	Street 2	30th Floor		
	City	New York		
	State ("NA" if non-U.S. address)			
	Zip/Postal Code 10022 Country (if non-U.S. United States address)			
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Stockholder	Stockholder		
Interest Percentages (enter percentage values	Voting	100.0% Jointly Held? No ebt 100.0%		
from 0.0 to 100.0)	Total assets (Equity Debt Plus)			
Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?			Yes	

Ownership Information			
FRN	0017239237		
Name	Philip A. Falcone		
Address	PO Box		
	Street 1 450 Park Avenue		

	Street 2	30th Floor	
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10022	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	'
Does interest holder have that do not appear on this	an attributable interest in one or report?	or more broadcast stations	Yes

Ownership Information				
FRN	9990133359	9990133359		
Name	Les Levi			
Address	PO Box			
	Street 1	450 Park Avenue		
	Street 2	30th Floor		
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code 10022			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Officer			
Interest Percentages (enter percentage values 0.0% Jointly Held?				
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a that do not appear on this r	n attributable interest in one o	r more broadcast stations	Yes	

Ownership Information			
FRN	9990134040		
Name	Ivan Minkov		
Address	РО Вох		

	Street 1	450 Park Avenue	
	Street 2	30th Floor	
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10022	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	Yes

Ownership Information			
FRN	9990133365		
Name	Jeanne Rouleau		
Address	РО Вох		
	Street 1	450 Park Avenue	
	Street 2	30th Floor	
	City	New York	
	State ("NA" if non-U.S. address)	·	
	Zip/Postal Code 10022		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Interest Percentages (enter percentage values	Voting	0.0% Jointly Held?	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	ts (Equity Debt 0.0%	
	Does interest holder have an attributable interest in one or more broadcast stations Yes that do not appear on this report?		

Ownership Information	
FRN	9990133362
Name	Michael Sena

Address	PO Box		
	Street 1	450 Park Avenue	
	Street 2	30th Floor	
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10022	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder	Other Interest Holder	
Positional Interests (check all that apply)	Director		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	r more broadcast stations	Yes

Ownership Information				
FRN	0027794148			
Name	Rebecca Hanson			
Address	РО Вох			
	Street 1	450 Park Avenue		
	Street 2	30th Floor		
	City	New York		
	State ("NA" if non-U.S. address)	NY		
	Zip/Postal Code	10022		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer			
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			Yes	

(b) Respondent certifies that any interests, including equit interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes			
(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?	No			
If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.				
NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.				
If using the subform, leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.				
The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.				
(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?				
If "Yes," provide the following information for each such the relationship.				

No

Certification Section Question Response

(e) Is Respondent seeking an attribution exemption for any officer or director with

If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be

duties wholly unrelated to the Licensee(s)?

attributed an interest.

Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Chief Financial Officer Exact Legal Title or Name of Respondent: Ivan P. Minkov Name: Ivan P. Minkov Phone: 2123395165